

Fill in this information to identify the case:	
United States Bankruptcy Court for the:	
District of <u>Puerto Rico</u> (State)	
Case number (<i>If known</i>):	<u>7</u>

Check if this is an amended filing

Official Form 205

Involuntary Petition Against a Non-Individual

12/15

Use this form to begin a bankruptcy case against a non-individual you allege to be a debtor subject to an involuntary case. If you want to begin a case against an individual, use the *Involuntary Petition Against an Individual* (Official Form 105). Be as complete and accurate as possible. If more space is needed, attach any additional sheets to this form. On the top of any additional pages, write debtor's name and case number (if known).

Part 1: Identify the Chapter of the Bankruptcy Code Under Which Petition Is Filed

1. Chapter of the
Bankruptcy Code *Check one:*

Chapter 7
 Chapter 11

Part 2: Identify the Debtor

2. Debtor's name Cosmogony II, Inc.

3. **Other names you know the debtor has used in the last 8 years** Known in the 1990's as "General Engineering Corporation"
Also has been known as "U&W Industrial Supply, Inc."
Include any assumed names.

4. Debtor's federal Employer Identification Number (EIN) Unknown

— FIN —

5 Debtor's address **Principal place of business**

c/o Office of the Lieutenant Governor of
Number the Virgin Islands
Street

1131 King Street, Suite 101

Christiansted, St. Croix USVI 00820
City State ZIP Code

USVI
County

Mailing address, if different

Number Street

PO Box

City State ZIP Code

Number Street

City _____ State _____ ZIP Code _____

See "Attachment A" for
Additional Addresses.

Debtor	Cosmogony II, Inc. Name		Case number (if known)
6. Debtor's website (URL) _____			
7. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other type of debtor. Specify: _____		
8. Type of debtor's business	Check one: <input type="checkbox"/> Health Care Business (as defined in 11 U.S.C. § 101(27A)) <input type="checkbox"/> Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) <input type="checkbox"/> Railroad (as defined in 11 U.S.C. § 101(44)) <input type="checkbox"/> Stockbroker (as defined in 11 U.S.C. § 101(53A)) <input type="checkbox"/> Commodity Broker (as defined in 11 U.S.C. § 101(6)) <input type="checkbox"/> Clearing Bank (as defined in 11 U.S.C. § 781(3)) <input checked="" type="checkbox"/> None of the types of business listed. <input type="checkbox"/> Unknown type of business.		
9. To the best of your knowledge, are any bankruptcy cases pending by or against any partner or affiliate of this debtor?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Debtor _____ Relationship _____ District _____ Date filed _____ Case number, if known _____ MM / DD / YYYY <input type="checkbox"/> Debtor _____ Relationship _____ District _____ Date filed _____ Case number, if known _____ MM / DD / YYYY		
Part 3: Report About the Case			
10. Venue	Check one: <input checked="" type="checkbox"/> Over the last 180 days before the filing of this bankruptcy, the debtor had a domicile, principal place of business, or principal assets in this district longer than in any other district. <input type="checkbox"/> A bankruptcy case concerning debtor's affiliates, general partner, or partnership is pending in this district.		
11. Allegations	Each petitioner is eligible to file this petition under 11 U.S.C. § 303(b). The debtor may be the subject of an involuntary case under 11 U.S.C. § 303(a). At least one box must be checked: <input checked="" type="checkbox"/> The debtor is generally not paying its debts as they become due, unless they are the subject of a bona fide dispute as to liability or amount. <input type="checkbox"/> Within 120 days before the filing of this petition, a custodian, other than a trustee, receiver, or an agent appointed or authorized to take charge of less than substantially all of the property of the debtor for the purpose of enforcing a lien against such property, was appointed or took possession.		
12. Has there been a transfer of any claim against the debtor by or to any petitioner?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach all documents that evidence the transfer and any statements required under Bankruptcy Rule 1003(a).		

Debtor	Cosmogony II, Inc. Name			Case number (if known)	
13. Each petitioner's claim		Name of petitioner	Nature of petitioner's claim	Amount of the claim above the value of any lien	
		Glencore Ltd.	Amount past-due and owing on indemnity claim	\$ 134,476.19	
				\$ _____	
				\$ _____	
				\$ _____	
			Total of petitioners' claims	\$ 134,476.19	
<p>If more space is needed to list petitioners, attach additional sheets. Write the alleged debtor's name and the case number, if known, at the top of each sheet. Following the format of this form, set out the information required in Parts 3 and 4 of the form for each additional petitioning creditor, the petitioner's claim, the petitioner's representative, and the petitioner's attorney. Include the statement under penalty of perjury set out in Part 4 of the form, followed by each additional petitioner's (or representative's) signature, along with the signature of the petitioner's attorney.</p>					
Part 4: Request for Relief					
<p>WARNING – Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.</p>					
<p>Petitioners request that an order for relief be entered against the debtor under the chapter of 11 U.S.C. specified in this petition. If a petitioning creditor is a corporation, attach the corporate ownership statement required by Bankruptcy Rule 1010(b). If any petitioner is a foreign representative appointed in a foreign proceeding, attach a certified copy of the order of the court granting recognition.</p>					
<p>I have examined the information in this document and have a reasonable belief that the information is true and correct.</p>					
Petitioners or Petitioners' Representative		Attorneys			
Name and mailing address of petitioner		Sergio A. Ramírez de Arellano, Esq.			
Glencore Ltd.		Printed name			
Name		SARLAW LLC			
330 Madison Ave.		Firm name, if any			
Number	Street	Banco Popular Center, Suite 1022, 209 Muñoz Rivera Ave.			
New York	New York	10017	Number Street		
City	State	ZIP Code	San Juan	Puerto Rico 00918-1009	
Name and mailing address of petitioner's representative, if any		City State ZIP Code			
Curtis, Mallet-Prevost, Colt & Mosle LLP c/o Eliot Lauer		Contact phone (787)765-2988 Email sramirez@sarlaw.com			
Name		Bar number 126804			
101 Park Avenue		State Puerto Rico			
Number	Street				
New York	New York	10178	Signature of attorney		
City	State	ZIP Code	<i>Sergio Ramírez de Arellano</i>		
<p>I declare under penalty of perjury that the foregoing is true and correct.</p>					
Executed on 06/13/2022		Date signed 06/13/2022			
MM / DD / YYYY		MM / DD / YYYY			
Signature of petitioner or representative, including representative's title					
Signature of petitioner or representative, including representative's title					

Debtor	<u>Cosmogony II, Inc.</u>	Name	Case number (if known) _____
Name and mailing address of petitioner			
Name _____		Printed name _____	
Number Street _____		Firm name, if any _____	
City _____	State _____	ZIP Code _____	Number Street _____
Name and mailing address of petitioner's representative, if any			
Name _____		Number Street _____	
Number Street _____		Bar number _____	
City _____	State _____	ZIP Code _____	State _____
I declare under penalty of perjury that the foregoing is true and correct.			
Executed on _____	MM / DD / YYYY	X _____	
Signature of petitioner or representative, including representative's title _____			
Name and mailing address of petitioner			
Name _____		Printed name _____	
Number Street _____		Firm name, if any _____	
City _____	State _____	ZIP Code _____	Number Street _____
Name and mailing address of petitioner's representative, if any			
Name _____		Bar number _____	
Number Street _____		State _____	
City _____	State _____	ZIP Code _____	
I declare under penalty of perjury that the foregoing is true and correct.			
Executed on _____	MM / DD / YYYY	X _____	
Signature of petitioner or representative, including representative's title _____			
Name and mailing address of petitioner			
Name _____		Printed name _____	
Number Street _____		Firm name, if any _____	
City _____	State _____	ZIP Code _____	Number Street _____
Name and mailing address of petitioner's representative, if any			
Name _____		Bar number _____	
Number Street _____		State _____	
City _____	State _____	ZIP Code _____	
I declare under penalty of perjury that the foregoing is true and correct.			
Executed on _____	MM / DD / YYYY	X _____	
Signature of petitioner or representative, including representative's title _____			

ATTACHMENT A

Continuation of box 5: Debtor's addresses

13 E Airport Road Christiansted, St. Croix, USVI 00820	P.O. Box 1720 Kingshill, St. Croix, USVI 00851
13F Estate Bethlehem Vitex Building, East Airport Rd. Kingshill, St. Croix, USVI 00850	c/o Mr. Joe Kramer 7B Peter's Rest Christiansted, St. Croix, USVI 00820